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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Brandi First name R. Middle name Jones Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-3193	

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4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live		If Debtor 2 lives at a different address:
		6949 N. Oakley, Apt. G	
ī		Chicago, IL 60645 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Cook	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing	Check one:	Check one:
	this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Document Page 3 of 65 Case number (if known) Debtor 1 Brandi R. Jones Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? ☐ Yes. District When Case number When Case number District When District Case number 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Relationship to you Debtor When Case number, if known District Debtor Relationship to you When District Case number, if known 11. Do you rent your Go to line 12. ☐ No. residence? Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? Yes.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this

No. Go to line 12.

bankruptcy petition.

Debtor 1	Brandi R. Jones	Document	Page 4 of 65 Case number (if know	n)

Part	Report About Any Bu	sinesses	You Own	as a Sole Proprietor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.
		☐ Yes.	Name	e and location of business
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any
	If you have more than one sole proprietorship, use a separate sheet and attach			per, Street, City, State & ZIP Code
	it to this petition.			k the appropriate box to describe your business:
				Health Care Business (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as defined in 11 U.S.C. § 101(53A))
				Commodity Broker (as defined in 11 U.S.C. § 101(6))
				None of the above
Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most				der Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate ndicate that you are a small business debtor, you must attach your most recent balance sheet, statement of low statement, and federal income tax return or if any of these documents do not exist, follow the procedure (1)(B).
	For a definition of small business debtor, see 11 U.S.C. § 101(51D).	No.	I am r	not filing under Chapter 11.
		□ No.	I am fi Code.	filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy .
		☐ Yes.	I am f	filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Part	4: Report if You Own or	Have Any	Hazardo	ous Property or Any Property That Needs Immediate Attention
14.	Do you own or have any	■ No.		
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?	Yes.	What is	the hazard?
				diate attention is , why is it needed?
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property? Number, Street, City, State & Zip Code

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Debtor 1 Brandi R. Jones

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

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Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Part	6: Answer These Questi	ons for R	eporting Purposes						
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred individual primarily for a personal, family, or household purpose."						
			☐ No. Go to line 16b.						
			Yes. Go to line 17.						
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.						
			□ No. Go to line 16c.						
			☐ Yes. Go to line 17.						
		16c.	State the type of debts you	owe that are not consumer debts or busine	ess debts				
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapte	er 7. Go to line 18.					
	Do you estimate that after any exempt property is excluded and	■ Yes.		Do you estimate that after any exempt pro available to distribute to unsecured creditors	perty is excluded and administrative expenses s?				
	administrative expenses are paid that funds will		No						
	be available for distribution to unsecured creditors?		☐ Yes						
18.	How many Creditors do	1 -49		1 ,000-5,000	□ 25,001-50,000				
	you estimate that you owe?	□ 50-99		□ 5001-10,000	□ 50,001-100,000				
		<u> </u>		□ 10,001-25,000	☐ More than100,000				
		□ 200-9	99						
19.	How much do you	\$0 - \$	50.000	☐ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion				
	estimate your assets to be worth?	□ \$50,001 - \$100,000		□ \$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion				
	be word.	□ \$100,001 - \$500,000		☐ \$50,000,001 - \$100 million	☐ \$10,000,000,001 - \$50 billion				
		□ \$500,001 - \$1 million □ \$100,000,001 - \$500 million □ More than \$50 billion							
20.	How much do you	□ \$0 - \$	50,000	☐ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion				
	estimate your liabilities to be?	□ \$50,001 - \$100,000		□ \$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion				
			001 - \$500,000	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion				
		□ \$500,	001 - \$1 million	1 \$100,000,001 - \$500 million	More than \$50 billion				
Part	7: Sign Below								
For	you	I have ex	amined this petition, and I de	eclare under penalty of perjury that the info	rmation provided is true and correct.				
				7, I am aware that I may proceed, if eligible relief available under each chapter, and I compared to the state of the stat					
				I not pay or agree to pay someone who is not he notice required by 11 U.S.C. § 342(b).	ot an attorney to help me fill out this				
I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.									
		bankrupt and 3571	nderstand making a false statement, concealing property, or obtaining money or property by fraud in connection with a nkruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, d 3571.						
			idi R. Jones R. Jones		or 2				
			e of Debtor 1	Signature of Debt	O. 2				
		Executed	d on June 29, 2016	Executed on					
MM / DD / YYYY MM / DD / YYYY					M / DD / YYYY				

Debtor 1 Brandi R. Jones Document Page 7 of 65 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ David M. Siegel	Date	June 29, 2016
Signature of Attorney for Debtor		MM / DD / YYYY
David M. Siegel		
Printed name		
David M. Siegel & Associates		
Firm name		
790 Chaddick Drive		
Wheeling, IL 60090		
Number, Street, City, State & ZIP Code		
Contact phone (847) 520-8100	Email address	
#06207611		
Bar number & State		

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Debtor 1	Brandi R. Jones			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number (if known)				☐ Check if this is an
(ii iaioiii)				amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filling amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	7,000.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	7,000.00
Pai	t 2: Summarize Your Liabilities		
			abilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	133,233.00
	Your total liabilities	\$	133,233.00
aı	t 3: Summarize Your Income and Expenses		
-	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,441.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,441.00
aı	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	hedules.
	■ Yes What kind of debt do you have?		

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

page 1 of 2

the court with your other schedules.

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8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Debtor 1 Brandi R. Jones

From Part 4 on Schedule E/F, copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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Desc Main Case 16-21026 Doc 1 Filed 06/29/16 Entered 06/29/16 09:20:33 6/29/16 8:59AM Document Page 10 of 65 Fill in this information to identify your case and this filing: Debtor 1 Brandi R. Jones First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ■ No ☐ Yes 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$0.00 pages you have attached for Part 2. Write that number here..... Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware ☐ No Yes. Describe..... **Household Goods & Furniture** \$600.00

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No

Yes. Describe.....

Document

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Case number (if known) Debtor 1 Brandi R. Jones TV & Electronics \$500.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ☐ No Yes. Describe..... **Normal Clothing** \$400.00 Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1.500.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ Yes..... 17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

□ No Institution name: ■ Yes.....

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Checking Account Chase Bank \$500.00 17.1. Checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. $\hfill \square$ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Institution name: Type of account: 401(k) **ERISA Qualified** \$5.000.00 **401K Retirement Plan** 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own?

Official Form 106A/B

Do not deduct secured

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Debtor 1	Brandi R. Jones			Case number (if known)	
					claims or exemptions.
■ No	funds owed to you Give specific information al	bout them, inc	cluding whether you alre	eady filed the returns and the tax years	
■ No		,,,	usal support, child supp	ort, maintenance, divorce settlement, property	/ settlement
Exam _i ■ No	amounts someone owes y ples: Unpaid wages, disabil benefits; unpaid loans . Give specific information	ity insurance		efits, sick pay, vacation pay, workers' compe	nsation, Social Security
Exam □ No -	. Name the insurance compa			HSA); credit, homeowner's, or renter's insura Beneficiary:	nce Surrender or refund value:
		n Life Insu th Benefit (rance Policy Only	Death Benefit Only	\$0.00
If you somed	aterest in property that is a are the beneficiary of a livin one has died. Give specific information			ed surance policy, or are currently entitled to rec	eive property because
Exam _i ■ No	s against third parties, whe ples: Accidents, employments. Describe each claim	nt disputes, in		it or made a demand for payment s to sue	
■ No	contingent and unliquidat Describe each claim		every nature, includin	g counterclaims of the debtor and rights to	o set off claims
35. Any fii	nancial assets you did no	t already list			

No. Go to Part 6.

37. Do you own or have any legal or equitable interest in any business-related property?

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

for Part 4. Write that number here.....

☐ Yes. Go to line 38.

 \square Yes. Give specific information..

■ No

Official Form 106A/B Schedule A/B: Property page 4

\$5,500.00

	Case 16-21026	Doc 1	Filed 06/29/16 Document	Entered 06/ Page 14 of 6	/29/16 09:20:33 5	Desc Main	6/29/16 8:59AM
Debto	r 1 Brandi R. Jones		Document		Case number (if known)		
Part 6:	Describe Any Farm- and Common If you own or have an interest in fa			n or Have an Interest	ln.		
46. D o	you own or have any legal o	r equitable in	nterest in any farm- or	commercial fishing	-related property?		
	No. Go to Part 7.						
	Yes. Go to line 47.						
Part 7:	Describe All Property You	Own or Have	an Interest in That You Did	l Not List Above			
	you have other property of a xamples: Season tickets, countr						
_	No Yes. Give specific information						
54. <i>A</i>	Add the dollar value of all of yo	our entries f	om Part 7. Write that n	umber here			\$0.00
Part 8:	List the Totals of Each Part	of this Form					
55. F	Part 1: Total real estate, line 2						\$0.00
56. F	Part 2: Total vehicles, line 5			\$0.00			
57. F	Part 3: Total personal and hou	sehold item	s, line 15	\$1,500.00			
58. F	Part 4: Total financial assets, I	ine 36		\$5,500.00			
	Part 5: Total business-related			\$0.00			
	Part 6: Total farm- and fishing-			\$0.00			
61. F	Part 7: Total other property no	t listed, line	54 +	\$0.00			

\$7,000.00

Copy personal property total

62. Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$7,000.00

\$7,000.00

		Documen	t Page 15 of 65		6/29/10 6.59AW
Fill in this infor	mation to identify your	case:			
Debtor 1	Brandi R. Jones				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT O	FILLINOIS		
Case number (if known)				_	ck if this is an inded filing
					

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Proper	y You Claim as Exempt
-----------------------------	-----------------------

1.	Which set of exemptions are	you claiming?	Check one only.	even if your s	pouse is filing	with yo	эu

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	· · · · · · · · · · · · · · · · · · ·		Specific laws that allow exemption
Household Goods & Furniture Line from Schedule A/B: 6.1	\$600.00		\$600.00	735 ILCS 5/12-1001(b)
Line Hori Schedule A/B. 0.1			100% of fair market value, up to any applicable statutory limit	
TV & Electronics Line from Schedule A/B: 7.1	\$500.00		\$500.00	735 ILCS 5/12-1001(b)
Line IIoiii Schedule A/B. 7.1			100% of fair market value, up to any applicable statutory limit	
Normal Clothing Line from Schedule A/B: 11.1	\$400.00		\$400.00	735 ILCS 5/12-1001(a)
Line IIoiii Schedule A/B. 11.1			100% of fair market value, up to any applicable statutory limit	
Checking: Checking Account Chase Bank	\$500.00		\$500.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
401(k): ERISA Qualified 401K Retirement Plan	\$5,000.00		\$5,000.00	735 ILCS 5/12-1006
Line from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit	

Desc Main Case 16-21026 Doc 1 Filed 06/29/16 Entered 06/29/16 09:20:33 Document Page 16 of 65 Case number (if known) Debtor 1 Brandi R. Jones Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B **Term Life Insurance Policy** 215 ILCS 5/238 \$0.00 \$0.00 **Death Benefit Only** 100% of fair market value, up to **Beneficiary: Death Benefit Only** Line from Schedule A/B: 31.1 any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Yes

ill in this information to identify your case:						
Debtor 1	Brandi R. Jones					
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS			
Case number						
(if known)						

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

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Document Page 18 of 65 Fill in this information to identify your case: Debtor 1 Brandi R. Jones First Name Middle Name Last Name Debtor 2 Middle Name (Spouse if, filing) First Name Last Name NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: Case number (if known) ☐ Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims Do any creditors have priority unsecured claims against you? No. Go to Part 2. ☐ Yes. List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of **Total claim** 4.1 Advocate Illinois Masonic Medical C Last 4 digits of account number 4303 \$413.00 Nonpriority Creditor's Name 22393 Network Place When was the debt incurred? Chicago, IL 60673 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Medical

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Advocate Medical Group	Last 4 digits of account number 4818	\$15.00
Nonpriority Creditor's Name 701 Lee St.	When was the debt incurred?	
Des Plaines, IL 60016		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes		
☐ Yes	■ Other. Specify Collections	
Ameri Cash Loans	Last 4 digits of account number 2717	\$1,500.0
Nonpriority Creditor's Name First Rate Financial	When was the debt incurred? 6/16	
1507 E 87th Street	<u> </u>	
Chicago, IL 60619	_	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify Personal Loan	
Ashley Stewart	Last 4 digits of account number 4495	\$2,033.0
Nonpriority Creditor's Name 300 Nixon Lane Edison, NJ 08837	When was the debt incurred?	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Purchases	

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4.5	AT&T	Last 4 digits of account number	6865	\$1,500.00
	Nonpriority Creditor's Name Bankruptcy Dept 6021 S. Rio Grande Ave, 1st Floor	When was the debt incurred?	6/16	
	Orlando, FL 32809-4613 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separeport as priority claims	d claim: aration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify Services	g plans, and other similar debts	
		— Other. Specify		
4.6	AT&T Nonpriority Creditor's Name	Last 4 digits of account number	3856	\$335.00
	Bankruptcy Dept 6021 S. Rio Grande Ave, 1st Floor Orlando, FL 32809-4613	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	□Yes	Other. Specify Services		
4.7	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	5737	\$3,453.00
	Bankruptcy Dept. PO Box 30285	When was the debt incurred?	10/14 - 6/16	
	Salt Lake City, UT 84130-0285 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure		
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa		
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharir	a plane, and other similar debte	
	■ No		וא אינו אינופו אווווומו מפטנא	
	Yes	■ Other. Specify Purchases		

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4.8	Capital One	Last 4 digits of account number 9816	\$634.00			
	Nonpriority Creditor's Name Bankruptcy Dept. PO Box 30285	When was the debt incurred? 5/11 - 6/16				
	Salt Lake City, UT 84130-0285 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify Purchases				
4.9	Capital One	Last 4 digits of account number 3757	\$611.00			
	Nonpriority Creditor's Name Bankruptcy Dept. PO Box 30285	When was the debt incurred?				
	Salt Lake City, UT 84130-0285 Number Street City State Zlp Code Who incurred the debt? Check one.	mber Street City State Zlp Code As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Purchases				
4.1 0	Citi	Last 4 digits of account number 6262	\$958.00			
	Nonpriority Creditor's Name Attn: Bankruptcy Department PO Box 6241	When was the debt incurred?				
	Sioux Falls, SD 57717	_				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	■ Other. Specify Purchases				

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Citicards CBNA	Last 4 digits of account number 6986	\$1,068.00
Nonpriority Creditor's Name 701 E. 60th St N Sioux Falls, SD 57104	When was the debt incurred? 10/13 - 6/16	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify Purchases	
City of Chicago	Last 4 digits of account number	\$120.0
Nonpriority Creditor's Name Dept. of Revenue PO Box 88292	When was the debt incurred? 6/16	
Chicago, IL 60680 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Ticket	
City of Chicago EMS	Last 4 digits of account number 1923	\$934.0
Nonpriority Creditor's Name 33589 Treasury Center Chicago, IL 60694-3500	When was the debt incurred?	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
_	Пол	
Debtor 1 only	Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
•	□ Debts to pension or profit-sharing plans, and other similar debts	
No		

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Case number (if know)

4.1	Comcast	Last 4 digits of account number	\$2,000.00
•	Nonpriority Creditor's Name PO Box 3002	When was the debt incurred? 6/16	, ,
	Southeastern, PA 19398-3002		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Services	
4.1	Comenity Bank/LNBRYANT	Last 4 digits of account number 3960	\$2,740.00
	Nonpriority Creditor's Name		
	PO Box 182789	When was the debt incurred?	
	Columbus, OH 43218-2789 Number Street City State Zlp Code	As of the date you file the claim in Observal, all that such	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Purchases	
4.1	Credit One	Last 4 digits of account number 8260	\$591.00
	Nonpriority Creditor's Name		
	Bankrupcty Department	When was the debt incurred? 6/15 - 6/16	
	PO Box 98873 Las Vegas, NV 89193		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another		
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Purchases	

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4.1 7	Creditors Collection Bureau Inc.	Last 4 digits of account number		\$150.00			
	Nonpriority Creditor's Name						
	PO Box 63 Kankakee, IL 60901	When was the debt incurred?					
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.	•					
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims	,				
	No	Debts to pension or profit-sharing	ng plans, and other similar debts				
	Yes	Other. Specify Collections	3				
4.1	Gateway One	Last 4 digits of account number		\$19,000.00			
3	Nonpriority Creditor's Name						
	PO Box 650004	When was the debt incurred?					
	Dallas, TX 75265-0004	=					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	IS: Check all that apply				
	Debtor 1 only	☐ Contingent					
	_						
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure					
	At least one of the debtors and another	Student loans					
	☐ Check if this claim is for a community debt	_					
	Is the claim subject to offset?	Obligations arising out of a separe report as priority claims					
	■ No	Debts to pension or profit-sharing					
		Auto Defic					
	Yes	Other. Specify 2015 Chrys	sler 200				
4.1	Gateway One Lending	Last 4 digits of account number	5162	\$11,049.00			
	Nonpriority Creditor's Name						
	3818 E. Coronado Street, Ste. 100	When was the debt incurred?	12/14 - 6/16				
	Anaheim, CA 92807 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.	,					
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt		aration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims					
	■ No	ng plans, and other similar debts					
	Пу	2015 Chrys	sler 200				
	☐ Yes ☐ Other. Specify Auto Deficiency						

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4.2	GECRB/Old Navy	Last 4 digits of account number 1045	\$1,851.00
	Nonpriority Creditor's Name PO Box 981400	When was the debt incurred? 5/12 - 6/16	<u> </u>
	C811 El Paso, TX 79998 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Purchases	
4.2	GECRB/SAMD	Last 4 digits of account number 3402	\$904.00
	Nonpriority Creditor's Name PO Box 981416	When was the debt incurred? 12/14 - 6/16	
	El Paso, TX 79998 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes		
	☐ Yes	Other. Specify Purchases	
4.2	Macy's	Last 4 digits of account number 5647	\$1,217.00
	Nonpriority Creditor's Name Bankruptcy Processing PO Box 8053	When was the debt incurred? 4/13 - 6/16	
	Mason, OH 45040 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Пол	
		☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Purchases	

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4.2	Nordstrom FSB	Last 4 digits of account number 3194	\$712.00
	Nonpriority Creditor's Name PO Box 13589	When was the debt incurred? 7/13 - 6/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	□ Debtor 2 only □ Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed	
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Purchases	
4.2	Nordstrom FSB	Last 4 digits of account number 609	\$696.00
	Nonpriority Creditor's Name Attention: Bankruptcy Department Po Box 6566	When was the debt incurred?	
	Englewood, CO 80155 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Purchases	
4.2	North Shore Pathology Consultants	Last 4 digits of account number 8131	\$127.00
	Nonpriority Creditor's Name Dept. 77-9277 Chicago, IL 60678	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical	

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Northwestern Medicine	Last 4 digits of account number 6396	\$1,352.00
Nonpriority Creditor's Name 28155 Network Place	When was the debt incurred?	
Chicago, IL 60673-1281		
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify Medical	
Northwestern Medicine	Last 4 digits of account number	\$370.00
Nonpriority Creditor's Name	Last 4 digits of account number	ψο, σ.σ.
28155 Network Place	When was the debt incurred?	
Chicago, IL 60673-1281 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	no or the date year me, the etail is officer an indicappy	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Collections	
Peoples Energy	Last 4 digits of account number 6722	\$146.00
Nonpriority Creditor's Name		· · · · · · · · · · · · · · · · · · ·
200 E. Randolph	When was the debt incurred? 8/13 - 6/16	
Chicago, IL 60601 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify Services	

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4.2 9	Presence Saint Francis Hospital	Last 4 digits of account number 3706	\$150.00
	Nonpriority Creditor's Name 621 17th Street	When was the debt incurred? 10/15 - 6/16	
	Suite 1800		
	Denver, CO 80293 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	,	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Collections	
4.3	Presence Saint Francis Hospital	Last 4 digits of account number 8424	\$150.00
	Nonpriority Creditor's Name 621 17th Street	When was the debt incurred?	
	Suite 1800	When was the dept incurred:	
	Denver, CO 80293		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical	
4.3	RCN	Last 4 digits of account number 1069	\$155.00
1	Nonpriority Creditor's Name	Last 4 digits of account number 1069	ψ133.00
	100 Baltimore Drive	When was the debt incurred? 12/14 - 6/16	
	Wilkes Barre, PA 18702 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim is. Offects all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
		Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	■ Other. Specify Collections	
		— Other. Specify	

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4.3	Senn High School	Last 4 digits of account number	\$269.00
	Nonpriority Creditor's Name 5900 N. Glenwood Ave.	When was the debt incurred?	
	Chicago, IL 60660 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Daughters school fee	
4.3	Swedish Emergency Assoc PC	Last 4 digits of account number 7512	\$676.00
	Nonpriority Creditor's Name		
	PO Box 366 Hinsdale, IL 60522	When was the debt incurred? 7/15 - 6/16	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	,	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Collections	
4.3	SYNCB/SAM'S CLUB DC	Last 4 digits of account number 7739	\$719.00
	Nonpriority Creditor's Name PO Box 965036 Orlando, FL 32896-5036	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Collections	

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4.3	TD Bank USA/Target Credit	Last 4 digits of account number 0337	\$1,148.00
	Nonpriority Creditor's Name PO Box 673	When was the debt incurred? 7/12 - 6/16	
	Minneapolis, MN 55440 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not	
		report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	☐ Yes	■ Other. Specify Purchases	
4.3	TD Bank USA/Target Credit	Last 4 digits of account number	\$1,058.00
	Nonpriority Creditor's Name PO Box 673 Minneapolis, MN 55440	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Collections	
4.3	US Cellular	Last 4 digits of account number 9742	\$115.00
	Nonpriority Creditor's Name Bankruptcy Department PO Box 7835	When was the debt incurred?	
	Madison, WI 53707-7835 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Services	

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6/29/16 8:59AM

Case number (if know) Debtor 1 Brandi R. Jones 4.3 US Dept of Ed/GleIsi 1279 \$72,314.00 Last 4 digits of account number 8 Nonpriority Creditor's Name 2401 International Ln., PO Box 7859 When was the debt incurred? 9/11 - 6/16 Madison, WI 53704 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Student Loans** Other. Specify Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Arnold Scott Harris** Line 4.12 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 111 W. Jackson, #600 ■ Part 2: Creditors with Nonpriority Unsecured Claims Chicago, IL 60604 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address AT&T Line 4.5 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Bankruptcy Dept. Part 2: Creditors with Nonpriority Unsecured Claims 1585 Waukegan Road Waukegan, IL 60085-6727 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address AT&T Line 4.5 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Bankruptcy Dept. Part 2: Creditors with Nonpriority Unsecured Claims 5407 Andrew Highway Midland, TX 79706 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? AT&T Line 4.6 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Bankruptcy Dept. Part 2: Creditors with Nonpriority Unsecured Claims 1585 Waukegan Road Waukegan, IL 60085-6727 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? AT&T Line 4.6 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Bankruptcy Dept. Part 2: Creditors with Nonpriority Unsecured Claims 5407 Andrew Highway Midland, TX 79706 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.15 of (Check one): **CB/Lane Bryant** ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 337001 ■ Part 2: Creditors with Nonpriority Unsecured Claims NorthGlenn, CO 80233-7001 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?

PO Box 182273
Official Form 106 F/F

CB/LANE BRYANT

☐ Part 1: Creditors with Priority Unsecured Claims

Line 4.15 of (Check one):

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Columbus, OH 43218		
	Last 4 digits of account number	
Name and Address Citi PO Box 6500		ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Sioux Falls, SD 57117-6500	Last 4 digits of account number	
Name and Address Citibank NA PO Box 769006 San Antonio, TX 78245		ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Comcast Bankruptcy Department 11621 E. Marginal Way 5 Tukwila, WA 98168-1965		ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address	On which entry in Part 1 or Part 2 did y	ou list the original creditor?
Creditors Collection Bureau Inc. PO Box 63 Kankakee, IL 60901	Line <u>4.29</u> of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address EGS Financial Care. Inc. PO BOX 1020 Dept. 108	On which entry in Part 1 or Part 2 did y Line 4.34 of (Check one):	ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Horsham, PA 19044	Last 4 digits of account number	
Name and Address Forster & Garbus, LLP 60 Motor Parkway Commack, NY 11725-5710		ou list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims
,	Last 4 digits of account number	
Name and Address GECRB/SAMD PO Box 981416 El Paso, TX 79998		ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address GECRB/SAMD PO Box 965005 Orlando, FL 32896-5005		ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address GECRB/SAMS PO Box 981400 El Paso, TX 79998		ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Gemb/Old Navy Bankruptcy Department PO Box 103104 Roswell, GA 30076		ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Gemb/SAMDC Bankruptcy Dept. PO Box 103104		ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

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Case number (if know) Debtor 1 Brandi R. Jones Roswell, GA 30076 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Harris & Harris LTD Line 4.27 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 222 Merchandise Mart Plaza ■ Part 2: Creditors with Nonpriority Unsecured Claims **Suite 1900** Chicago, IL 60654 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? IC Systems, Inc. Line 4.31 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 64378 ■ Part 2: Creditors with Nonpriority Unsecured Claims Saint Paul, MN 55164-0378 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **MACYSDSNB** Line 4.22 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 911 Duke Blvd. Part 2: Creditors with Nonpriority Unsecured Claims Mason, OH 45040 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Line 4.2 of (Check one): Malcom S. Gerald & Assoc., Inc. ☐ Part 1: Creditors with Priority Unsecured Claims 332 S. Michigan Ave Part 2: Creditors with Nonpriority Unsecured Claims Suite 600 Chicago, IL 60604 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Medical Business Bureau, LLC Line 4.33 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O.BOX 1219 Part 2: Creditors with Nonpriority Unsecured Claims Park Ridge, IL 60068-1349 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Nordstrom Bank** Line 4.23 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 79134 ■ Part 2: Creditors with Nonpriority Unsecured Claims Phoenix, AZ 85062-9134 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Nordstrom Bank** Line 4.24 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 79134 ■ Part 2: Creditors with Nonpriority Unsecured Claims Phoenix, AZ 85062-9134 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Nordstrom FSB Line 4.23 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims **Attention: Bankruptcy Department** Part 2: Creditors with Nonpriority Unsecured Claims Po Box 6566 Englewood, CO 80155 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Nordstrom FSB Line 4.24 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 13589 Part 2: Creditors with Nonpriority Unsecured Claims Scottsdale, AZ 85267-3589 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Secretary of State Line 4.12 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Safety & Financial Responsibility Part 2: Creditors with Nonpriority Unsecured Claims 2701 South Dirksen Parkway Springfield, IL 62723 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Secretary of State License Renewal Line 4.12 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 3701 Winchester Road Part 2: Creditors with Nonpriority Unsecured Claims

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Springfield, IL 62707-9700	Last 4 digits of account numb	per
Name and Address Target NB CCS Gray OPS Center	On which entry in Part 1 or P Line 4.35 of (<i>Check one</i>):	Part 2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
PO Box 6497 Sioux Falls, SD 57117	Last 4 digits of account number	per
Name and Address Target NB CCS Gray OPS Center	On which entry in Part 1 or P Line 4.36 of (<i>Check one</i>):	Part 2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
PO Box 6497 Sioux Falls, SD 57117	Last 4 digits of account numb	per
Name and Address TD Bank USA/Target Credit 3701 Wayzata Blvd. Minneapolis, MN 55416-3401	On which entry in Part 1 or P Line 4.35 of (Check one):	Part 2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account numb	per
Name and Address TD Bank USA/Target Credit 3701 Wayzata Blvd. Minneapolis, MN 55416-3401	On which entry in Part 1 or P Line 4.36 of (Check one): Last 4 digits of account numb	Part 2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims per
Name and Address WFNNB/Lane Bryant Bankruptcy Department PO Box 182789 Columbus, OH 43218	On which entry in Part 1 or P Line 4.15 of (Check one): Last 4 digits of account numb	Part 2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address WFNNB/Lane Bryant Retail c/o Client Services, Inc. 3451 Harry Truman Blvd. Saint Charles, MO 63301-4047	On which entry in Part 1 or P Line 4.15 of (Check one):	Part 2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that		0.00
		you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 133,233.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 133,233.00

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Page 36 of 65 Document Fill in this information to identify your case: Debtor 1 Brandi R. Jones Middle Name Last Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: Case number (if known)

☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Peak Properties
2201 West Roscoe Street
Chicago, IL 60618

State what the contract or lease is for
Term of Lease: Yearly
Expires: 6/17

	0000 10 21020	Docume	nt Page 37 o	f 65	6/29/16 8:59AN
Fill in thi	s information to identify your				
Debtor 1	Brandi R. Jones				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fi	ling) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case num	nber				
(if known)					☐ Check if this is an amended filing
Officia	al Form 106H				
	dule H: Your Cod	ebtors			12/15
ill it out, a our name	e filing together, both are equand number the entries in the e and case number (if known)	boxes on the left. Attach . Answer every question	the Additional Page to	o this page. On the top of	ed, copy the Additional Page, any Additional Pages, write
1. 50	you have any codebiors: (II	you are ming a joint case, t	do not list either spouse	as a codebior.	
■ No					
□ Ye	S				
	thin the last 8 years, have you na, California, Idaho, Louisiana				ites and territories include
■ No	. Go to line 3.				
☐ Ye	s. Did your spouse, former spo	use, or legal equivalent live	with you at the time?		
in lin Form	e 2 again as a codebtor only i	f that person is a guaran	or or cosigner. Make s	sure you have listed the ci	th you. List the person shown reditor on Schedule D (Official edule E/F, or Schedule G to fil
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The creditor Check all schedules the	or to whom you owe the debt at apply:
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line _	
	Number Street City	State	ZIP Code	_	
3.2				☐ Schedule D, line	
	Name			☐ Schedule E/F, line ☐ Schedule G, line	
	Number Street			_	

State

City

ZIP Code

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Fill	in this information to identify your c	ase.				ı				
	otor 1 Brandi R. Jo									
	otor 2									
Uni	ted States Bankruptcy Court for the	e: NORTHERN DISTRIC	CT OF ILLINOIS							
	se number 		-			☐ Ai		ent showing	postpetition ch	napter
0	fficial Form 106l					\overline{M}	M / DD/ Y	YYY		
S	chedule I: Your Inc	ome								12/1
sup spo atta	as complete and accurate as pos plying correct information. If you use. If you are separated and you ch a separate sheet to this form. **Describe Employment**	are married and not filing w	ng jointly, and your s ith you, do not includ	pouse e infor	is liv mati	ing with on about	you, inclu your spo	ude inform ouse. If mo	ation about yo re space is ne	our eded,
1.	Fill in your employment information.		Debtor 1				Debtor 2	or non-fili	ng spouse	
	If you have more than one job,	Employment status	■ Employed				☐ Emplo	oyed		
	attach a separate page with information about additional	Linployment status	☐ Not employed				☐ Not er	mployed		
	employers.	Occupation	Team Leader / St	upervi	sor					
	Include part-time, seasonal, or self-employed work.	Employer's name	Northwestern Ho	spital						
	Occupation may include student or homemaker, if it applies.	Employer's address	676 N. St. Clair Chicago, IL 6061	1						
		How long employed t	here? 11 Years	3			_			
Par	t 2: Give Details About Mo	nthly Income								
	mate monthly income as of the duse unless you are separated.	late you file this form. If	you have nothing to re	oort for	any	line, write	\$0 in the	space. Incl	ude your non-f	iling
,	u or your non-filing spouse have m e space, attach a separate sheet to		ombine the information	for all e	empl	oyers for t	hat perso	n on the lin	es below. If you	u need
						For Deb	tor 1	For Deb	tor 2 or g spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	4,	678.00	\$	N/A	
3.	Estimate and list monthly over	time pay.		3.	+\$		0.00	+\$	N/A	

4,678.00

N/A

Calculate gross Income. Add line 2 + line 3.

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Deb	tor 1	Brandi R. Jones		Case ı	number (<i>if known</i>)			
				For	Debtor 1		Debtor 2 or -filing spouse	
	Cop	by line 4 here	4.	\$	4,678.00	\$	N/A	ı
5.	l ist	all payroll deductions:						
٥.	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	738.00	\$	N/A	
	5a. 5b.	Mandatory contributions for retirement plans	5a. 5b.	\$ 	119.00	\$ 	N/A N/A	-
	5c.	Voluntary contributions for retirement plans	5c.	\$ 	0.00	\$	N/A	-
	5d.	Required repayments of retirement fund loans	5d.	\$ [—]	0.00	\$ 	N/A	-
	5e.	Insurance	5e.	\$_	378.00	\$_	N/A	-
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A	=
	5g.	Union dues	5g.	\$-	0.00	<u>\$</u> —	N/A	-
	5h.	Other deductions. Specify: Voluntary DepLife	5h.+			+ \$	N/A	-
^			_			· —		-
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	1,237.00	\$	N/A	-
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	3,441.00	\$	N/A	-
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A	-
	8c. 8d.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation	8c. 8d.	\$ \$	0.00	\$ \$	N/A N/A	-
	8e.	Social Security	8e.	\$	0.00	\$	N/A	=
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	_ 8f. _ 8g.	\$	0.00	\$	N/A N/A	-
	8h.	Other monthly income. Specify:	8h.+	· —		+ \$ -	N/A	-
						_		- -
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A	\
10	Cald	culate monthly income. Add line 7 + line 9.	10. \$	•	3,441.00 + \$		N/A = \$	3.441.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			3,441.00
11.	Stat Inclu othe Do n	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your ear friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	depend		•		Schedule J. 11. +\$	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The result that amount on the Summary of Schedules and Statistical Summary of Certain lies					12. \$	3,441.00
								y income
13.	Do y	you expect an increase or decrease within the year after you file this form? No.	?					,
		Yes. Explain:						

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	in this information to identify your case: stor 1 Brandi R. Jones		Ch	eck if this is:	
	ouse, if filing)				g owing postpetition chapter of the following date:
Unit	ed States Bankruptcy Court for the: NORTHERN DISTRICT OF IL	LINOIS		MM / DD / YYYY	
	e numbernown)				
O	fficial Form 106J				
S	chedule J: Your Expenses				12/15
info nur	as complete and accurate as possible. If two married people ormation. If more space is needed, attach another sheet to the nber (if known). Answer every question.				
Par 1.	t 1: Describe Your Household Is this a joint case?				
	■ No. Go to line 2. □ Yes. Does Debtor 2 live in a separate household?				
	☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expen</i>	nses for Separate Housel	nold of De	ebtor 2.	
2.	Do you have dependents? ☐ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information to each dependent			Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.	Daughter		16	■ Yes
		Brother disable	. d	45	□ No
		Diotilei disable	t u		_
					□ Yes
					□ No
					_ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents?				
	t 2: Estimate Your Ongoing Monthly Expenses				
exp	imate your expenses as of your bankruptcy filing date unles senses as of a date after the bankruptcy is filed. If this is a solicable date.				
the	lude expenses paid for with non-cash government assistand value of such assistance and have included it on <i>Schedule</i> ficial Form 106I.)			Your ex	penses
4.	The rental or home ownership expenses for your residence payments and any rent for the ground or lot.	e. Include first mortgage	4.	\$	1,275.00
	If not included in line 4:				
	4a. Real estate taxes		4a.	·	0.00
	4b. Property, homeowner's, or renter's insurance		4b.		0.00
	Home maintenance, repair, and upkeep expenses Homeowner's association or condominium dues		4c. 4d.	·	0.00 0.00

5. \$

5. Additional mortgage payments for your residence, such as home equity loans

0.00

Debtor 1	Brandi R. Jones	Case num	ber (if known)	
i. Util	ities:			
o. Util 6a.	Electricity, heat, natural gas	6a.	\$	235.00
6b.	Water, sewer, garbage collection	6b.	\$	30.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	300.00
6d.	Other. Specify:	6d.	·	0.00
	d and housekeeping supplies	7.	\$	450.00
	Idcare and children's education costs	8.	\$	0.00
_	thing, laundry, and dry cleaning	9.	\$	50.00
	sonal care products and services	10.	\$	100.00
	lical and dental expenses	11.	\$	54.00
	nsportation. Include gas, maintenance, bus or train fare.	11.	Ψ	34.00
	not include car payments.	12.	\$	325.00
	ertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	26.00
	ritable contributions and religious donations	14.		0.00
	urance.			0.00
	not include insurance deducted from your pay or included in lines 4 or 20.			
	. Life insurance	15a.	\$	0.00
15b	. Health insurance	15b.	\$	0.00
15c	. Vehicle insurance	15c.	\$	0.00
	. Other insurance. Specify:	15d.	· -	0.00
	es. Do not include taxes deducted from your pay or included in lines 4 or 20.		·	0.00
_	cify:	16.	\$	0.00
	allment or lease payments:		· -	
	. Car payments for Vehicle 1	17a.	\$	410.00
	. Car payments for Vehicle 2	17b.	\$	0.00
17c	. Other. Specify:	17c.	\$	0.00
	Other. Specify:	17d.	\$	0.00
	ir payments of alimony, maintenance, and support that you did not report as		· —	
	ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).		\$	0.00
	er payments you make to support others who do not live with you.		\$	0.00
Spe	cify:	19.		
0. Oth	er real property expenses not included in lines 4 or 5 of this form or on School	edule I: Yo	our Income.	
20a	. Mortgages on other property	20a.	\$	0.00
20b	. Real estate taxes	20b.	\$	0.00
20c	. Property, homeowner's, or renter's insurance	20c.	\$	0.00
20d	. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20e	. Homeowner's association or condominium dues	20e.	\$	0.00
i. Oth	er: Specify: Auto Maintenance	21.	+\$	100.00
	tion High School & Art Supplies/Field Trips		+\$	86.00
- 1 41	tion riigh ochool & Art oupplies/ricid rrips			00.00
	culate your monthly expenses			
	. Add lines 4 through 21.		\$	3,441.00
22b	. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c	. Add line 22a and 22b. The result is your monthly expenses.		\$	3,441.00
	and a to a common and the most for a common			,
	culate your monthly net income.	00:	c	0.444.00
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	· . —————	3,441.00
23b	. Copy your monthly expenses from line 22c above.	23b.	-\$	3,441.00
230	Subtract your monthly expenses from your monthly income.			
200	The result is your <i>monthly net income</i> .	23c.	\$	0.00
4 De	you expect an ingresse or decrease in value expenses within the very street	ou filo 4h!-	form?	
For	you expect an increase or decrease in your expenses within the year after your expenses within the year after your car loan within the year or do you expect you			e or decrease because of a
	ification to the terms of your mortgage?			
— [No.			
	/es. Explain here:			

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Fill in this inforn	nation to identify your	case:			
Debtor 1	Brandi R. Jones				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	NORTHERN DISTRIC	T OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an amended filing
Official Form	-				
Declarat	ion About a	ın individua	I Debtor's S	chedules	12/15
years, or both. 18	3 U.S.C. §§ 152, 1341, 1 1 Below		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		00, or imprisonment for up to 20
Did you pay	or agree to pay some	one who is NOT an atto	orney to help you fill ou	ut bankruptcy forms?	
■ No					
☐ Yes. N	lame of person				nkruptcy Petition Preparer's Notice, n, and Signature (Official Form 119)
	ty of perjury, I declare true and correct.	that I have read the su	mmary and schedules t	filed with this declarati	ion and
X /s/ Brar	ndi R. Jones		X		
	R. Jones e of Debtor 1		Signature	of Debtor 2	

Date

Date June 29, 2016

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Fill	l in this	information to identify yo	our case:			
	btor 1	Brandi R. Jone				
	5101 1	First Name	Middle Name	Last Name		
1 -	btor 2 ouse if, filir	ng) First Name	Middle Name	Last Name		
UII	illeu Sia	tes Bankruptcy Court for th	e. NORTHERN DISTRICT	OF ILLINOIS		
	se numb	ber				Check if this is an amended filing
St Be	atem	plete and accurate as pos	Affairs for Individual saible. If two married people d, attach a separate sheet to lestion.	are filing together, both are	e equally responsible for su	
Pa	rt 1:	Give Details About Your I	Marital Status and Where Yo	ı Lived Before		
1.	What i	is your current marital sta	itus?			
		Married				
	■ N	lot married				
2.	During	g the last 3 years, have yo	ou lived anywhere other than	where you live now?		
	_		, , , , , , , , , , , , , , , , , , , ,			
	_	lo	u lived in the last 3 years. Do n	at include where you live no	.,	
	ш '	es. List all of the places yo	u lived ili tile last 3 years. Do i	of include where you live not	v.	
	Debto	or 1 Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior A	ddress:	Dates Debtor 2 lived there
3. stat			ever live with a spouse or le California, Idaho, Louisiana, Ne			
	_	lo 'es. Make sure you fill out S	Schedule H: Your Codebtors (C	fficial Form 106H).		
Pa	rt 2	Explain the Sources of You	our Income			
4.	Fill in t	the total amount of income	employment or from operation you received from all jobs and you have income that you receive	all businesses, including part	t-time activities.	endar years?
	□ N	lo				
		es. Fill in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)

Official Form 107

■ Wages, commissions,

Operating a business

bonuses, tips

\$23,388.00

☐ Wages, commissions,

Operating a business

bonuses, tips

From January 1 of current year until the date you filed for bankruptcy:

Debtor 1 Brandi R. Jones Document Page 44 of 65 Case number (if known)

				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of incommendation Check all that a		Gross income (before deductions and exclusions)
	or last caler anuary 1 to	ndar year: December	31, 2015)	■ Wages, commissions, bonuses, tips	\$68,679.00	☐ Wages, com bonuses, tips	missions,	
				☐ Operating a business		☐ Operating a l	business	
		dar year be December		■ Wages, commissions, bonuses, tips	\$39,000.00	☐ Wages, combonuses, tips	missions,	
				☐ Operating a business		☐ Operating a	business	
	winnings. List each	If you are fili	ng a joint cas	pensions; rental income; inter e and you have income that y me from each source separat	ou received together, list it o	only once under De	ebtor 1.	a gambling and lottery
	– 100.	i iii iii dio de	idio.	Dalitand		Dahiana		
				Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of inc Describe below.		Gross income (before deductions and exclusions)
Pa	art 3: Lis	t Certain Pa	yments You	Made Before You Filed for B	Bankruptcy			
6.	Are eithe ☐ No.	Neither Deindividual puring the No.	ebtor 1 nor D primarily for a 90 days before Go to line 7 List below expaid that creater include	s debts primarily consumer rebtor 2 has primarily consumer personal, family, or household re you filed for bankruptcy, die ach creditor to whom you paid editor. Do not include payment payments to an attorney for the on 4/01/19 and every 3 years	Imer debts. Consumer debts d purpose." d you pay any creditor a tota d a total of \$6,425* or more in the for domestic support obligates bankruptcy case.	I of \$6,425* or mor n one or more pay pations, such as ch	re? ments and the	ne total amount you nd alimony. Also, do
	Yes.			r both have primarily consure you filed for bankruptcy, die		I of \$600 or more?		
		■ No.	Go to line 7					
		□ _{Yes}	include pay	each creditor to whom you paid ments for domestic support of this bankruptcy case.				
	Creditor	's Name and	d Address	Dates of payme	nt Total amount	Amount you still owe	Was this p	eayment for

Document Page 45 of 65 Debtor 1 ase number (if known) Brandi R. Jones Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. **Insider's Name and Address** Reason for this payment Dates of payment **Total amount** Amount you still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider **Insider's Name and Address** Dates of payment **Total amount** Amount you Reason for this payment still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. П No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address** Describe the Property Date Value of the property Explain what happened **Gateway One Lending** 4/16 2015 Chrysler 200 \$0.00 3818 E. Coronado Street, Ste. 100 Anaheim, CA 92807 Property was repossessed. ☐ Property was foreclosed. □ Property was garnished. □ Property was attached, seized or levied. 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Nο Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

■ No

☐ Yes

Debtor 1 Brandi R. Jones Document Page 46 of 65

Case number (if known)

Pai	t 5: List Certain Gifts and Contributions				
13.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift.	ptcy, (did you give any gifts with a total value of more th	nan \$600 per person	?
	Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift and		Describe the gifts	Dates you gave the gifts	Value
14.	Address: Within 2 years before you filed for bankru	ptcy, (did you give any gifts or contributions with a tota	I value of more than	\$600 to any charity?
	No☐ Yes. Fill in the details for each gift or cor	ntribut	iion.		
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	tal	Describe what you contributed	Dates you contributed	Value
Pai	t 6: List Certain Losses				
15.	Within 1 year before you filed for bankrupt or gambling? ■ No □ Yes. Fill in the details.	tcy or	since you filed for bankruptcy, did you lose anyt	hing because of the	ft, fire, other disaster,
	how the loss occurred	nclude	ibe any insurance coverage for the loss e the amount that insurance has paid. List pending nce claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Pai	t 7: List Certain Payments or Transfers				
16.	consulted about seeking bankruptcy or pr	epari	id you or anyone else acting on your behalf pay on ga bankruptcy petition? s, or credit counseling agencies for services required.		erty to anyone you
	□ No				
	Yes. Fill in the details.				
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	u	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	David M. Siegel & Associates 790 Chaddick Drive Wheeling, IL 60090		Attorney Fees	6/1/16	\$675.00
17.	Within 1 year before you filed for bankrupt promised to help you deal with your credit Do not include any payment or transfer that y No Yes. Fill in the details.	tors o		r transfer any prope	erty to anyone who
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was made	Amount of payment

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ase number (if known)

Debtor 1 Brandi R. Jones

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. Nο Yes. Fill in the details. **Person Who Received Transfer** Description and value of Describe any property or Date transfer was Address property transferred payments received or debts made paid in exchange Person's relationship to you 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Yes. Fill in the details. Name of trust Description and value of the property transferred **Date Transfer was** made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Name of Financial Institution and Last 4 digits of Type of account or Last balance Date account was account number closed, sold, Address (Number, Street, City, State and ZIP instrument before closing or Code) moved, or transfer transferred 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Describe the contents Do you still Who else had access to it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, have it? State and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details. Name of Storage Facility Who else has or had access Describe the contents Do you still Address (Number, Street, City, State and ZIP Code) to it? have it? Address (Number, Street, City, State and ZIP Code) Part 9: Identify Property You Hold or Control for Someone Else Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Nο Yes. Fill in the details. **Owner's Name** Where is the property? Describe the property Value (Number, Street, City, State and ZIP Address (Number, Street, City, State and ZIP Code)

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Case number (if known) Document

Debtor 1 Brandi R. Jones

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

	haz	ardous material, pollutant, contaminant,	or similar term.		,,	,
Rep	ort a	II notices, releases, and proceedings the	at you know about, regardless of wher	n the	ey occurred.	
24.	Has	any governmental unit notified you that	you may be liable or potentially liable	und	ler or in violation of an environm	ental law?
		No				
		Yes. Fill in the details.				
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice
25.	Hav	e you notified any governmental unit of	any release of hazardous material?			
		No Yes. Fill in the details.				
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice
26.	Hav	re you been a party in any judicial or adn	ninistrative proceeding under any envi	ronr	mental law? Include settlements	and orders.
		No Yes. Fill in the details.				
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ture of the case	Status of the case
Par	t 11:	Give Details About Your Business or	Connections to Any Business			
27.	Wit	— hin 4 years before you filed for bankrupt	cy, did you own a business or have an	v of	the following connections to any	/ husiness?
		☐ A sole proprietor or self-employed i		-		,
		☐ A member of a limited liability comp	any (LLC) or limited liability partnersh	ip (L	LP)	
		☐ A partner in a partnership				
		☐ An officer, director, or managing ex	ecutive of a corporation			
		☐ An owner of at least 5% of the voting	g or equity securities of a corporation			
		No. None of the above applies. Go to F	Part 12.			
		Yes. Check all that apply above and fill	in the details below for each business	S.		
		siness Name dress	Describe the nature of the business		Employer Identification numbe Do not include Social Security	
		mber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Dates business existed	number of fritt.
28.		hin 2 years before you filed for bankrupt itutions, creditors, or other parties.	cy, did you give a financial statement t	to ar		ude all financial
		No				
		Yes. Fill in the details below.				
	Ad	me dress mber, Street, City, State and ZIP Code)	Date Issued			

Part 12: Sign Below

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Case number (if known)

Document Debtor 1 Brandi R. Jones

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Brandi R. Jones	
Brandi R. Jones	Signature of Debtor 2
Signature of Debtor 1	
Date June 29, 2016	Date
Did you attach addition ■ No	pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
□ Yes	
Did you pay or agree to	ay someone who is not an attorney to help you fill out bankruptcy forms?
No	
Yes. Name of Person	. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Debtor 1	Brandi R. Jones			
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
case number [☐ Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

information below. Identify the creditor and the property that is collateral	What do you intend to do with the preparty that	Did you aloin the preparty
identify the creditor and the property that is conateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	□Yes
property	Retain the property and [explain]:	
securing debt:	— Notalin the property and [explain].	
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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			Document Page 31 01 03	
Deb	otor 1 Brandi R.	. Jones	Case number (if	known)
n	ame:		☐ Retain the property and redeem it.	☐ Yes
D	escription of		☐ Retain the property and enter into a Reaffirmation Agreement.	
р	roperty		☐ Retain the property and [explain]:	
S	ecuring debt:			
Part	2: List Your U	nexpired Personal Property Le	33505	
or a	any unexpired per e information belo	rsonal property lease that you ow. Do not list real estate leas	listed in Schedule G: Executory Contracts and Une es. Unexpired leases are leases that are still in effective ase if the trustee does not assume it. 11 U.S.C. § 36	ct; the lease period has not yet ended.
Des	cribe your unexp	ired personal property leases		Will the lease be assumed?
Les	sor's name:	Peak Properties		□ No
				■ Yes
	cription of leased perty:	Term of Lease: Yearly Expires: 6/17		
Part	3: Sign Below	,		
		ury, I declare that I have indica ct to an unexpired lease.	ted my intention about any property of my estate th	at secures a debt and any personal
X	/s/ Brandi R. Je	ones	x	
	Brandi R. Jone		Signature of Debtor 2	
	Signature of Debt	tor 1		

Date

Date

June 29, 2016

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

С	hapter 7:	Liquidation
	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

6/29/16 8:59AM

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-21026 Doc 1 Filed 06/29/16 Entered 06/29/16 09:20:33 Desc Main Document Page 56 of 65

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In r	e Brandi R. Jon	ies		Case No.		
			Debtor(s)	Chapter	7	
	DIS	SCLOSURE OF COM	MPENSATION OF ATTOR	RNEY FOR D	EBTOR(S)	
1.	compensation paid t	o me within one year before t	P. 2016(b), I certify that I am the attorn the filing of the petition in bankruptcy, plation of or in connection with the ban	or agreed to be pai	d to me, for services re	ndered or to
					1,350.00	
	Prior to the filin	ng of this statement I have rec	ceived	\$	675.00	
	Balance Due			\$	675.00	
2.	The source of the co	ompensation paid to me was:				
	Debtor	☐ Other (specify):				
3.	The source of compo	ensation to be paid to me is:				
	Debtor	☐ Other (specify):				
4.	■ I have not agree	d to share the above-disclosed	d compensation with any other person	unless they are mer	mbers and associates of	my law firm.
			ompensation with a person or persons we the names of the people sharing in the			aw firm. A
5.	In return for the abo	ove-disclosed fee, I have agree	ed to render legal service for all aspects	s of the bankruptcy	case, including:	
	 b. Preparation and t c. Representation o d. [Other provision Negotiation agreement 	filing of any petition, schedul of the debtor at the meeting of s as needed] ons with secured credito	d rendering advice to the debtor in determined responsible to the debtor in determined responsible to the debtor in determined reductions and confirmation hearing, and the responsible to reduce to market value; exercised representation and filing of regoods.	may be required; d any adjourned he emption planning	earings thereof;	tion
6.	Represen		osed fee does not include the following any dischargeability actions, judio oceeding.		ces (except in Chap	oter 13
			CERTIFICATION			
this	I certify that the fore bankruptcy proceeding		nt of any agreement or arrangement for	payment to me for	representation of the d	ebtor(s) in
	June 29, 2016		/s/ David M. Siege	a l		
_	Date		David M. Siegel			
			Signature of Attorne David M. Siegel &			
			790 Chaddick Dri Wheeling, IL 6009	ve		

(847) 520-8100 Name of law firm

Chapter 7 Bankruptcy Retainer Agreement

This agreement acknowledges that the undersigned individual(s) [Client(s)] hereby retains and employs the Law Firm of DAVID M. SIEGEL & ASSOCIATES [Attorney] for representation in a Chapter 7 bankruptcy case. In consideration for services rendered and to be rendered, the Client agrees to pay Attorney as follows:

- a) A FLAT FEE as specified in paragraph H will be required to file a bankruptcy petition for the Client and for representation of the Client through discharge. The fee includes all required court costs and filing fees, as well as compensation for Attorney's time and labor. The fee is immediate compensation for the firm's commitment to perform future services; the fee is property of the firm and may be deposited in the firm's operating or business account.
- b) Representation shall begin upon execution of this agreement and tender of the initial payment, and will continue until the end of the case. The fee includes the preparation, review, and revision of the bankruptcy petition, communications with the Client, representation and appearance at the §341 Meeting of Creditors and §2004 examinations as necessary, communication with the bankruptcy and United States trustees, communication with creditors, review and completion of reaffirmation agreements, and court appearances.
- c) The fee **does not** include representation in any adversarial proceedings. The Client and Attorney may enter in to an additional agreement to provide for representation in an adversarial proceeding. In the event that the case is converted to another Chapter, there may be an additional fee.
- d) Additional Fees:
 - A fee of \$250.00 shall be added in the event that Client misses the scheduled §341 Meeting of Creditors.
 - A fee of \$100.00 shall be added to amend Schedules D, E, and F to include creditors who were not originally provided by the Client. The Client has the full responsibility to ensure that all creditors are listed.
 - A fee of \$25.00 shall be added for any non-sufficient/returned checks. Post-dated checks are not accepted and will be voided upon receipt.
 - A fee of \$820.00 shall be added to reopen a case and file the second credit counseling certificate if the Client fails to take the second credit counseling course and provide Attorney with the certificate in a timely fashion.
- e) The Client will be billed on any outstanding balance at the rate of \$100.00 every two weeks. Clients who fail to make payments as required will be assessed late fees in the amount of \$25.00 per billing period plus interest at the rate of 18% per year on any unpaid balance.
- f) No case shall be filed until all fees are paid in full.
- g) In the event that a Client pays the flat fee in full, and later elects to not proceed with the case, the Client is entitled to a refund of the court costs and filing fees only.

Important Bankruptcy Information

Debts that are Discharged

The Chapter 7 discharge order eliminates a Client's legal obligation to pay a debt that is discharged. Most, but not all, types of debts are discharged if the debt existed on the date the bankruptcy case was filed. (If this case was begun under a different Chapter of the Bankruptcy Code and converted to a Chapter 7, the discharge applies to debts owed when the bankruptcy case was converted.)

Debts that are Not Discharged

Some of the common types of debts which are not discharged in a Chapter 7 bankruptcy case are:

a) Debts for most taxes;

Н.

- b) Debts that are in the nature of alimony, maintenance, or support;
- c) Debts for student loans;
- d) Debts for most fines, penalties, forfeitures, or criminal restitution obligations;
- e) Debts for personal injuries or death caused by the Client's operation of a motor vehicle while intoxicated;
- f) Some debts that are not properly listed by the Client;
- g) Debts that the bankruptcy court specifically determines to be non-dischargeable;

The FLAT FEE for representation in this matter will be \$_

h) Debts for which the Client has given up the discharge protection by signing reaffirmation agreements in compliance with the Bankruptcy Code requirements for reaffirming debts.

	agreement in its entirety, understands it fully, has had an ement, is satisfied with it, and accepts it in its entirety.
Date: 5/27/16	Signed: Grand Reform
į.	Print: Brandi R Jones
Date:	Signed:
	Print:
Date: 5/37/16 Signed:	

Attorney for David M. Siegel

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United States Bankruptcy CourtNorthern District of Illinois

		Tior therm District or Inmiors		
In re	Brandi R. Jones		Case No.	
		Debtor(s)	Chapter 7	
	VE	RIFICATION OF CREDITOR N	MATRIX	
		Number of	f Creditors:	58
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of credi	tors is true and correct	to the best of my
Date:	June 29, 2016	/s/ Brandi R. Jones Brandi R. Jones		

Advocate Illinois Masonic Medical C 22393 Network Place Chicago, IL 60673

Advocate Medical Group 701 Lee St. Des Plaines, IL 60016

Ameri Cash Loans First Rate Financial 1507 E 87th Street Chicago, IL 60619

Arnold Scott Harris 111 W. Jackson, #600 Chicago, IL 60604

Ashley Stewart 300 Nixon Lane Edison, NJ 08837

AT&T Bankruptcy Dept 6021 S. Rio Grande Ave, 1st Floor Orlando, FL 32809-4613

AT&T Bankruptcy Dept. 1585 Waukegan Road Waukegan, IL 60085-6727

AT&T Bankruptcy Dept. 5407 Andrew Highway Midland, TX 79706

Capital One Bankruptcy Dept. PO Box 30285 Salt Lake City, UT 84130-0285

CB/Lane Bryant PO Box 337001 NorthGlenn, CO 80233-7001 CB/LANE BRYANT PO Box 182273 Columbus, OH 43218

Citi Attn: Bankruptcy Department PO Box 6241 Sioux Falls, SD 57717

Citi PO Box 6500 Sioux Falls, SD 57117-6500

Citibank NA PO Box 769006 San Antonio, TX 78245

Citicards CBNA 701 E. 60th St N Sioux Falls, SD 57104

City of Chicago Dept. of Revenue PO Box 88292 Chicago, IL 60680

City of Chicago EMS 33589 Treasury Center Chicago, IL 60694-3500

Comcast PO Box 3002 Southeastern, PA 19398-3002

Comcast Bankruptcy Department 11621 E. Marginal Way 5 Tukwila, WA 98168-1965

Comenity Bank/LNBRYANT PO Box 182789 Columbus, OH 43218-2789

Credit One Bankrupcty Department PO Box 98873 Las Vegas, NV 89193

Creditors Collection Bureau Inc. PO Box 63 Kankakee, IL 60901

EGS Financial Care. Inc. PO BOX 1020 Dept. 108 Horsham, PA 19044

Forster & Garbus, LLP 60 Motor Parkway Commack, NY 11725-5710

Gateway One PO Box 650004 Dallas, TX 75265-0004

Gateway One Lending 3818 E. Coronado Street, Ste. 100 Anaheim, CA 92807

GECRB/Old Navy PO Box 981400 C811 El Paso, TX 79998

GECRB/SAMD PO Box 981416 El Paso, TX 79998

GECRB/SAMD PO Box 965005 Orlando, FL 32896-5005

GECRB/SAMS PO Box 981400 El Paso, TX 79998 Gemb/Old Navy Bankruptcy Department PO Box 103104 Roswell, GA 30076

Gemb/SAMDC Bankruptcy Dept. PO Box 103104 Roswell, GA 30076

Harris & Harris LTD 222 Merchandise Mart Plaza Suite 1900 Chicago, IL 60654

IC Systems, Inc. PO Box 64378 Saint Paul, MN 55164-0378

Macy's Bankruptcy Processing PO Box 8053 Mason, OH 45040

MACYSDSNB 911 Duke Blvd. Mason, OH 45040

Malcom S. Gerald & Assoc., Inc. 332 S. Michigan Ave Suite 600 Chicago, IL 60604

Medical Business Bureau, LLC P.O.BOX 1219
Park Ridge, IL 60068-1349

Nordstrom Bank PO Box 79134 Phoenix, AZ 85062-9134

Nordstrom FSB PO Box 13589 Scottsdale, AZ 85267-3589 Nordstrom FSB Attention: Bankruptcy Department Po Box 6566 Englewood, CO 80155

North Shore Pathology Consultants Dept. 77-9277 Chicago, IL 60678

Northwestern Medicine 28155 Network Place Chicago, IL 60673-1281

Peoples Energy 200 E. Randolph Chicago, IL 60601

Presence Saint Francis Hospital 621 17th Street Suite 1800 Denver, CO 80293

RCN 100 Baltimore Drive Wilkes Barre, PA 18702

Secretary of State Safety & Financial Responsibility 2701 South Dirksen Parkway Springfield, IL 62723

Secretary of State License Renewal 3701 Winchester Road Springfield, IL 62707-9700

Senn High School 5900 N. Glenwood Ave. Chicago, IL 60660

Swedish Emergency Assoc PC PO Box 366 Hinsdale, IL 60522

SYNCB/SAM'S CLUB DC PO Box 965036 Orlando, FL 32896-5036

Target NB CCS Gray OPS Center PO Box 6497 Sioux Falls, SD 57117

TD Bank USA/Target Credit PO Box 673 Minneapolis, MN 55440

TD Bank USA/Target Credit 3701 Wayzata Blvd. Minneapolis, MN 55416-3401

US Cellular Bankruptcy Department PO Box 7835 Madison, WI 53707-7835

US Dept of Ed/Glelsi 2401 International Ln., PO Box 7859 Madison, WI 53704

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